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PTO/SB/21 (05-03)

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	TD A NOSAITT A I		Filing Date	April 17, 2001								
	TRANSMITTAL		First Named Inventor	BUTCHER, EUGENE C.								
	FORM		Group Art Unit	1644								
	(to be used for all correspondence after initial	l filing)	Examiner Name	ROARK, JESSICA H. STAN-110CON								
	Total Number of Pages in This Submission	18	Attorney Docket Number	STAN-110CON								
ENCLOSURES (check all that apply)												
	ENCLOSUR Tee Transmittal Form Fee Attached Trawin The Assign (for an incomplete Application) Fee Attached Trawin Trawin Assign (for an incomplete Application) Assign (for an incomplete Application) Petition Petition Petition Petition Petition Petition Provis Address Response to Missing Parts/ Percomplete Application		ment Papers Application) g(s) ing-related Papers in to Convert to a conal Application of Attorney, Revocation e of Correspondence	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below): 1. Postcard								
	SIGNATU	JRE OF APPL	ICANT, ATTORNEY, OR	AGENT								
Signing Attorney/Agent (Reg. No.) Signature JAMES S. KEDDIE, PH.D., 48,920 BOZICEVIC, FIELD & FRANCIS LLP October 2, 2003												
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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (05-03)

Approved for use through 04/30/2003. OMB 0651-0032

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FEE TRANSMITTAL		Complete if Known					
FEE IRANSIVIITIAL	/	Application Number		mber	09/837,446	09/837,446	
for FY 2003					April 17, 2001	Dr.	
101 F 1 2003				ventor	BUTCHER, EUGENE C.	17CC	
Effective 01/01/2003. Patent fees are subject to annual revision	ı,	E			ROARK, JESSICA H.	RECE	
	""	Art Unit			1644	OCT 18	
Applicant claims small entity status. See 37 CFR 1.27	-					<u> </u>	
TOTAL AMOUNT OF PAYMENT (\$) 55	<u>, l</u>	Attorne	y Dock	et No.	STAN-110CON		
METHOD OF PAYMENT (check all that apply)	<u> </u>			FEI	E CALCULATION (continued)	CENTER 1600,	
☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None	3. A		ONAL F			1600	
☑ Deposit Account:	Ī	Large Entity		Small Entity			
	Fee	Fee	Fee	Fee	_		
Deposit Account Number 50-0815	Code	(\$)	Code	(\$)	Fee Description	Fee Paid	
Deposit Account Name Bozicevic, Field & Francis LLP	1051	130	2051	65	Surcharge – late filing fee or oath		
The Commissioner authorized to: (check all that apply)	1052	50	2052		Surcharge – late provisional filing fee or		
 ☑ Charge fees indicated below ☑ Credit any overpayments ☑ Charge any additional fee(s) during the pendency of this 	1				cover sheet		
application	1053	130	1053		Non-English specification		
Charge fees indicated below, except for the filing fee	1812	2,520	1812	2,520	For filing a request for ex parte reexamination		
to the above-identified deposit account.	1804	920*	1804		Requesting publication of SIR prior to Examination action		
FEE CALCULATION	1805	1,840*	1805		Requesting publication of SIR after		
. BASIC FILING FEE	1,000	1,040	1000		Examiner action		
Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid	1251	110	2251	55	Extension for reply within first month		
Code (\$) Code (\$)	1252	410	2252	205	Extension for reply within second month		
1001 750 2001 375 Utility filing fee	1253	930	2253	465	Extension for reply within third month		
1002 330 2002 165 Design filing fee	1254	1,450	2254	725	Extension for reply within fourth month		
1003 520 2003 260 Plant filing fee	1255	1,970	2255	985	Extension for reply within fifth month		
1004 750 2004 375 Reissue filing fee	1401	320	2401	160	Notice of Appeal		
1005 160 2005 80 Provisional filing fee	1402	320	2402	160	Filing a brief in support of an appeal		
SUBTOTAL (1)	1403	280	2403	140	Request for oral hearing		
	1451	1,510	1451	1,510	Petition to institute a public use proceeding		
EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from	1452	110	2452	55	Petition to revive – unavoidable		
Extra Claims below Fee Paid	1453	1,300	2453	650	Petition to revive – unintentional		
otal Claims -20** = x =	1501	1,300	2501	650	Utility issue fee (or reissue)		
ndep3** = x =	1502	470	2502		Design issue fee		
Claims	1503	630	2503		Plant issue fee		
Multiple Dependent =	1406	130	1460		Petitions to the Commissioner		
arge Entity Small Entity	1807	50	1807		Processing fee under 37 CFR 1.17(q)		
ee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt		
Code (\$) Code (\$) 202 18 2202 9 Claims in excess of 20	8021	40	8021		Recording each patent assignment per property (times number of properties)		
	1809	750	2809	375	Filing a submission after final rejection		
201 84 2201 42 Independent claims in excess of 3	1040	750	2042		(37 CFR § 1.129(a))		
203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810		For each additional invention to be examined (37 CFR § 1.129(b))		
204 84 2204 42 ** Reissue independent claims	1801	750	2801	375	Request for Continued Examination (RCE)		
over original patent		900	1802		Request for expedited examination		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent			cifu)		of a design application Terminal Disclaimer under 37 CFR 1.20(d)	55	
SUBTOTAL (2) \$	Care	fee (spe	~117/		Tominal Discialina Glaci ST OFTC 1.20(0)		
or number previously paid, if greater, For Reissues, see above.	*Radi	iced by F	Basic Fili	nn Fee G	Paid SUBTOTAL (3) (\$)	55	
SUBMITTED BY	, vedi	Jour Dy L	-aao (III	9 66	Complete (if applicable)		
,	Registr	ation No)	_	Complete (ii applicable)		
Name (Print/Type) James S. Keddie, Ph.D.		ey/Agent		48,92	0 Telephone (650) 32	7-3400	

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